Fill in this infor	mation to identify	y your case:			
Debtor 1	Mark First Name	Irving Middle Name	Martin Last Name	Che	eck if this is:
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	— Ø	An amended filing
United States Bankruptcy Court for the:		MIDDLE DIST.	DDLE DIST. OF PENNSYLVANIA		A supplement showing postpetition chapter 13 income as of the following date:
Case number (if known)	1:23-bk-00064				MM / DD / YYYY
Official Form 1	001			<u>-</u>	WINT DB / TTT

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:	Describe	Employment

١.	Fill in your employment information. If you have more than one		Debtor 1			Debtor 2 or non-fil	ing spou	se
	job, attach a separate page with information about	Employment status	EmployedNot employed			☐ Employed✓ Not employed		
	additional employers.	Occupation	Education Servi	ces Spe	cialist	Homemaker		
	Include part-time, seasonal, or self-employed work.	Employer's name	DFAS-DGG-CL					
	Occupation may include student or homemaker, if it	Employer's address	GARNISHMENT OPERATIONS					
		memaker, if it	Number Street			Number Street		
	applies.		PO BOX 998002					
			CLEVELAND	ОН	44199-800			
			City	State	Zip Code	City	State	Zip Code
		How long employed th	ere? <u>17 years</u>		_			_

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

			—————	non-filing spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$6,137.73	\$0.00
3.	Estimate and list monthly overtime pay.	3. +	\$0.00	\$0.00
4.	Calculate gross income. Add line 2 + line 3.	4.	\$6,137.73	\$0.00

Official Form 106l Schedule I: Your Income page 1
Case 1:23-bk-00064-HWV Doc 69 Filed 11/01/24 Entered 11/01/24 09:19:24 Desc
Main Document Page 1 of 7

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly 12. \$8,143.38

income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies.

Combined monthly income

13. Do you expect an increase or decrease within the year after you file this form?

Non Filing Spouse's child support will reduce in a few months for one child, estaimated reduced figure Yes. Explain: is on schedule I.

Desc

Debtor 1 **Mark Irving Martin** Case number (if known) 1:23-bk-00064

5h.	Other Payroll Deductions (details)	_	For Debtor 1	For Debtor 2 or non-filing spouse
	LST		\$4.33	
	Local		\$88.31	
	FEGLI		\$26.35	
		Totals:	\$118.99	\$0.00

	ormation to iden			Check if the		
Debtor 1	Mark First Name	Irving Middle Name	Martin Last Name		mended filing oplement showing	nootpotition
Debtor 2					ter 13 expenses a	
(Spouse, if filing)) First Name	Middle Name	Last Name	follov	ving date:	
United States Ba	ankruptcy Court for th	ne: MIDDLE DIST. 0	OF PENNSYLVANIA		DD / YYYY	
Case number (if known)	1:23-bk-0006	4				
fficial Form	106J					
chedule J:	Your Expens	es				12/ ⁻
orrect information	n. If more space is		eople are filing together er sheet to this form. O			
Part 1: Des	cribe Your Hous	sehold				
Is this a joint of	case?					
	es Debtor 2 live in a No	separate household?	·2, Expenses for Separat	e Household of Debto	or 2.	
Do you have d] No				
Do not list Deb Debtor 2.	tor 1 and	Yes. Fill out this inf for each dependent.	Dobtor 1 o	t's relationship to or Debtor 2	Dependent's age	Does depende
			Wife		38	□ No - ☑ Yes
Do not state the names.	e dependents'		Son		12	□ No □ Yes
			Son		19	□ No □ Yes
			Son		18	□ No □ Yes
			Son		16	□ No - ☑ Yes
	nses include eople other than our dependents?	✓ No □ Yes				
Part 2: Esti	mate Your Ong	oing Monthly Expe	enses			
report expenses	•	he bankruptcy is filed.	nless you are using this . If this is a supplemen	• • •	-	
		•	tance if you know the v ncome (Official Form 10		Your expens	ses
		penses for your resided any rent for the groun			4	\$1,500.0
If not included	l in line 4:					
	te taxes				4a	
4a. Real estat						
	homeowner's, or ren	ter's insurance			4b	
4b. Property,	homeowner's, or ren				4b 4c.	\$200.0

	_ Case number (if known) <u>1</u>	:23-DK-UUU04 enses
	<u>.</u>	
. Additional mortgage payments for your residence, such as home equity loa	ans 5	
. Utilities:		
6a. Electricity, heat, natural gas	6a	\$450.00
6b. Water, sewer, garbage collection	6b	\$107.00
 Telephone, cell phone, Internet, satellite, and cable services 	6c	\$250.00
6d. Other. Specify:	6d	
Food and housekeeping supplies	7.	\$1,500.00
Childcare and children's education costs	8.	\$100.00
. Clothing, laundry, and dry cleaning	9.	\$200.00
0. Personal care products and services	10.	\$50.00
1. Medical and dental expenses	11.	\$250.00
Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$350.0
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$60.0
4. Charitable contributions and religious donations	14.	
5. Insurance.		
Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a	
15b. Health insurance	15b	
15c. Vehicle insurance	15c	\$335.0
15d. Other insurance. Specify:	15d	
6. Taxes. Do not include taxes deducted from your pay or included in lines 4 or Specify:	r 20. 16	
7. Installment or lease payments:		
17a. Car payments for Vehicle 1 2015 Dodge SEE PLAN	17a	
17b. Car payments for Vehicle 2 2011 Audi SEE PLAN	17b.	
17c. Other. Specify: pet supplies and pet care	17c	\$75.0
17d. Other. Specify: VA Disability not devoted to plan	17d.	\$2,066.3
8. Your payments of alimony, maintenance, and support that you did not rep deducted from your pay on line 5, Schedule I, Your Income (Official Form		
9. Other payments you make to support others who do not live with you.		
Specify:	19.	

Main Document

Page 5 of 7

Deb	tor 1	Mark Irving Martin	Case number (if known)	1:23-bk-00064
20.		real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.		
	20a.	Mortgages on other property	20a	
	20b.	Real estate taxes	20b	
	20c.	Property, homeowner's, or renter's insurance	20c	
	20d.	Maintenance, repair, and upkeep expenses	20d	
	20e.	Homeowner's association or condominium dues	20e	
21.	Other	. Specify:	21. +	
22.	Calcu	late your monthly expenses.		
	22a.	Add lines 4 through 21.	22a	\$7,493.38
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b	_
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$7,493.38
23.	Calcu	late your monthly net income.		
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a	\$8,143.38
	23b.	Copy your monthly expenses from line 22c above.	23b. _ _	\$7,493.38
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	\$650.00
24.	Do yo	ou expect an increase or decrease in your expenses within the year after you	ı file this form?	
	For example, do you expect to finish paying for your car loan within the year or do you expect your more payment to increase or decrease because of a modification to the terms of your mortgage?		. ,	
	□ 1	No		
Yes. Explain here: Home requires very high repair cost to stop condemnation, proposed mortgage payment SE				

Debto	r 1 Mark Irving Martin	Case number	(if known) 1:	1:23-bk-00064	
2. <u>A</u>	Additional Dependents:	Dependent's relationship to Debtor 1 or Debtor 2	Dependent' age	's Does dependent live with you?	

Daughter

☐ No ☑ Yes